



STATE OF WASHINGTON
APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT



For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.)

- ☒ Change purpose(s) of use
☐ Add purpose(s) of use
☐ Change point(s) of diversion/withdrawal
☒ Add point(s) of diversion/withdrawal
☒ Change/transfer place of use
☐ Other (i.e. consolidation, intertie, trust water)

Explain: Change to allow for withdrawal & redistribution by LWWD

CS4-SWC 9776		45	
FOR OFFICE USE ONLY			
CHANGE No.	Chel-12-07	WRIA	45
DATE ACCEPTED	10-24-2012	9/13/12	BY WFA
FEE \$	1000.00	REC'D	9/13/12
CHECK No.			
ECY Coding:	001-002-WR10285-000011		
SEPA:	<input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Not exempt		

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Lake Wenatchee Water District	()	()
ADDRESS		
16621 Brown Road		
CITY	STATE	ZIP CODE
Leavenworth	WA	98826

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Marc Marquis	(509) 679-0337	()
ADDRESS		
Peterson & Marquis 1227 First St.		
CITY	STATE	ZIP CODE
Wenatchee	WA	98801

LEGAL LAND OWNER or PART OWNER NAME OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
Same	()	()
ADDRESS		
CITY	STATE	ZIP CODE

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
SWC 9776	Lester Addition Water Company
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

34-18099CWR15			
FOR OFFICE USE ONLY			
APP. NO.	18099	PERMIT NO.	13357
CERT. NO.	09776	CERT. OF CHANGE NO.	
Chel-12-07		CS4-SWC 9776	

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL
Barnard Creek		Gov Lot 2		16	27	17	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL
Barnard Creek		Gov Lot 2		16	27N	17	
Wells		NW	SE	18	27N	17	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Community Domestic Supply	0.1cfs	6af*	Continuous
*Estimated			

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal	0.1cfs	6af	Continuous

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

The following described tracts, within Gov't Lot 4, Sec. 18, T. 27 N., R. 17 E.W.M.:

Lots 1 through 4, inclusive, of the Plat of Lester Addition; AND

Paul and Norma Overturf Tracts: beginning at a point 710 feet east of the southwest corner of said Sec. 18; thence north 208 feet; thence east 104 feet; thence south 208 feet; thence west 104 feet to point of beginning; AND

Dan and Helen Farnham Tracts: beginning at a point 606 feet east of the southwest corner of said Sec. 18; thence north 208 feet; thence west 104 feet; thence south 208 feet; thence east 104 feet to point of beginning; AND

Sam K. and Carolyn H. Wood Tracts: beginning at a point 814 feet east and 208 feet north from the southwest corner of said Sec. 18; thence south 119.17 feet; thence east 237.75 feet; thence northwesterly 140.50 feet to a point 198.50 feet east from point of beginning; thence west 198.50 feet to point of beginning.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
	Gov Lot 4	18	27	17	Chelan	multiple	

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

Service Area of Lake Wenatchee Water District

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?	
<input type="checkbox"/> YES <input type="checkbox"/> NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____	

6. Remarks and Other Relevant Information:


Lake Wenatchee Water District has assumed responsibility for providing municipal water service to the place of use currently associated with the referenced water document. The District now desires to preserve the existing POD, change the place of use to the District's service area and allow for withdrawal of the right from the District's authorized POWs.
IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

 (Applicant Signature)	_____ (Applicant Signature)	<u>9/17/12</u> (Date)
MARC MARQUIS, AUTH. REP. OF LWWD		
_____ (Water Right Holder)	_____ (Water Right Holder)	<u> / / </u> (Date)
_____ (Land Owner(s) of Proposed Place of Use)	_____ (Land Owner(s) of Proposed Place of Use)	<u> / / </u> (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> APPLICATION FEE NOT ENCLOSED	<input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____ DATE: ____/____/____	